

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90004 043 ***150.00

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1. Entity Name

PEAR PROPERTIES CORPORATION



Principal Place of Business

6787 FIJI CIRCLE
BOYNTON BEACH FL 33437
US

Mailing Address

P.O. BOX 740296
BOYNTON BEACH FL 33474
US



2. Principal Place of Business

2905 McCLINTOCK WAY

3. Mailing Address

P O BOX 7510

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

PORT ST LUCIE, FL

City & State

PORT ST LUCIE FL

4. FEI Number

20-0162919

Applied For

Not Applicable

Zip

34952

Country

ST LUCIE

Zip

34952

Country

ST LUCIE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRANKEL, GERALD
6787 FIJI CIRCLE
BOYNTON BEACH FL 33437

7. Name and Address of New Registered Agent

Name: GERALD FRANKEL
Street Address (P.O. Box Number is Not Acceptable):
2905 McCLINTOCK WAY
PORT ST LUCIE
City: FL Zip Code: 34952

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: D,P ☐ Delete
NAME: FRANKEL, GERALD
STREET ADDRESS: 6787 FIJI CIRCLE
CITY-ST-ZIP: BOYNTON BEACH FL 33437

TITLE: VP ☐ Delete
NAME: FRANKEL, MARILYN
STREET ADDRESS: 6787 FIJI CIRCLE
CITY-ST-ZIP: BOYNTON BEACH FL 33437

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: D,P ☐ Change ☐ Addition
NAME: FRANKEL, GERALD
STREET ADDRESS: 2905 McCLINTOCK WAY
CITY-ST-ZIP: PORT ST LUCIE, FL 34952

TITLE: V ☐ Change ☐ Addition
NAME: FRANKEL, MARILYN
STREET ADDRESS: 2905 McCLINTOCK WAY
CITY-ST-ZIP: PORT ST LUCIE, FL 34952

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(302) 503-9257